Attorne	ey or Party Name, Address, Telephone and Fax Number, a	and IASB ID No.	F	OR COURT USE ONLY	
Attorn	ey for				
	UNITED STATES BANKRUPTC SOUTHERN DISTRICT OF IC				
In re:					
		Debto			
			CHAPTER		
		Plaintiff(s), CASE NUM	IBER	
	vs.			DVERSARY NUMBER (If Applicable)	
		Defendant(s).		
	SUE	STITUTION OF	ATTORNE	Υ	
1.	The name of the party making this Su	bstitution of Attorne	y is (specify n	ame):	
2.	The name, address and telephone nu	mber of the New Att	orney are (sp	ecify):	
3.	New Attorney hereby appears in the foll	owing matters:	☐ The case	☐ The above Adversary Proceeding	
4.	The New Attorney is substituted as attorney of record in place and stead of the Present Attorney. (Specify name of Present Attorney):				
Dated	:				
Type Name of Party				Signature of Party	
I cons	ent to the above substitution.				
Dated	:				
Type	Name of Present Attorney			Signature of Present Attorney	
Type Name of Present Attorney				-	
I am d	luly admitted to practice in this district.	The above substituti	on is accepte	d.	
Dated	:				
Туре І	Name of New Attorney			Signature of New Attorney	
-	- -			-	

Substitution of Attorney - Page Two (2) IASB - SUB ATTY [4/14/00]

In re		CHAPTER
	Debtor.	CASE NUMBER
IMPORTANT NOTIC	E	
The filing of the within Substitution of Attorney form does not obviate the Code. See Local Bankruptcy Rule 2090-1(6)(e) regarding the requirement employ an attorney.		
PROOF OF SERVICE	E	
STATE OF IOWA COUNTY OF		
I am employed in the above County, State of Iowa. I am over the age of business address is as follows:	f 18 and	not a party to the within action. My
On	ction by	nent described as: SUBSTITUTION OF placing a true and correct copy thereof in, lowa,
		Addresses continued on attached page
I declare under penalty of perjury under the laws of the United States of A	America	that the foregoing is true and correct.
Type Name	Signatui	re